

FEC
FORM 3REPORT OF RECEIPTS
AND DISBURSEMENTS
For An Authorized Committee

SECRETARY OF THE SENATE

14 OCT 23 PM 5:13

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Al Franken for Senate 2014

ADDRESS (number and street)

P.O. Box 583144

Check if different
than previously
reported. (ACC)

Minneapolis

MN

55458

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C

C00480384

3. IS THIS
-
- REPORT

NEW
(N)

OR

AMENDED
(A)

MN

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD / YYYY
11 / 04 / 2014in the
State of

MN

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

in the
State of

5. Covering Period

MM / DD / YYYY
10 / 01 / 2014

through

MM / DD / YYYY
10 / 15 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Thomas Borman

Signature of Treasurer

Thomas Borman

TBorman

Date

MM / DD / YYYY
10 / 23 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
OnlyFEC FORM 3
(Revised 02/2003)